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	V	6.00
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i e	Paper Check Conversion Check/Money Order Am Amt Tendered: \$6.90	on un: 9402 B
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and the second of the second o	Only when bank clear verifies credit of f or debt officially p discharged. A fee of charged for returned	s the check or unds is the res aid or 353.00 will be checks.

Form DC-135A	Commonwealth of Pennsylvania Department of Corrections
INMATE'S REQUEST TO STAFF MEMBER	WIGHTONIA
	INSTRUCTIONS
CCX3 Suffile	Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more
ZEN 3 Dell 111	promptly and intelligently.
T (I) of Officer)	2. Date:
. To: (Name and Title of Officer)	12.29.20
E. By: (Print Inmate Name and Number)	
. By: (Print Inmate Name and Number)	4. Counselor's Name:
KX2Gov KeyinCort	Baldin
	5. Unit Manager's Name:
	Calpino
Inmate Signature	
6. Work Assignment:	7. Housing Assignment:
A ACT AND ACT OF THE PARTY OF T	BD4
. Subject: State your request completely but briefly. Gi	ve details.
First like to Kant I show a other	status despite what police 13:8:1 appropriate due Needing for personal
would like to know who author	the beat what police 13.81
3My Status to have Me on AC.	itatus despite what police sail
Sec 12 States verbal response Not	appropriate due Needing for personal
records	
1 SCHOOL	
9. Response: (This Section for Staff Response Only)	
T. DO 44 CAR only [7]	To DC-14 CAR and DC-15 IRS
To DC-14 CAR only □	The Ewith Street English E
TARE MEMBER NAME	DATE
TAFF MEMBER NAMEPrint	Signature

	My hour recreation per My Consti- lent and why am, only allowed owed to Call or email my family and copy or reducted Copy of the Memo
9. Response: (This Section for Staff Response Only)	
To DC-14 CAR only □	To DC-14 CAR and DC-15 IRS □

Form DC-135A	Commonwealth of Pennsylvania Department of Corrections
INMATE'S REQUEST TO STAFF MEMBER	
CCX3 Self File	INSTRUCTIONS
X 1 orlando	Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more
K I O' lando	promptly and intelligently.
. To: (Name and Title of Officer)	2. Date:
grievance Coordinator orlando	12-10-20
By: (Print Inmate Name and Number)	4. Counselor's Name:
KX2601 Keun ait	Fraicer
	5. Unit Manager's Name:
	O ti veri
Inmate Signature	
3. Work Assignment:	7. Housing Assignment:
Janifor	JD 13
Subject: State your request completely but briefly. Gi	ve details.
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ality and AdM Sill i have yet	to receive a vink copy for my
	A A A A A A A A A A A A A A A A A A A
Triceiving Answers to My request SI CCPM in Hendey, um Calfina, MM Slips i have been told By Mrs alive	ips and grevances i would like for
crom in Hinday, um Calling, um	aliver to respond to My & request
sin i have trud Di Mes alive	ci she is Not receiving My reguest
Slips I have need 1010 By plus out	
i would like this matter investigate	a.
Response: (This Section for Staff Response Only)	
5. (Yesponso. (The social tel standard)	
To DC-14 CAR only □	
	To DC-14 CAR and DC-15 IRS □
TAFF MEMBER NAME	To DC-14 CAR and DC-15 IRS DATE

INMATE'S REQUEST TO STAFF MEMBER CCK3 Self file K 1 Grundo 1. To: (Name and Title of Officer) Orkada	Commonwealth of Pennsylvania Department of Corrections INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently. 2. Date:
3. By: (Print Inmate Name and Number) **IKAbel Kevin Co.	4. Counselor's Name: Fraizer 5. Unit Manager's Name: Oliver 7. Housing Assignment:
danitar	9P-13
3. Subject: State your request completely but briefly. G Mrs. orlands: would like to know who	and the first term of the state
	en will i be able to go to the law right wow Cot vi wether & Coit v. Ger Mese Cases because i own Not ary i can Not got Copies or nothing copied and can not because i
Response: (This Section for Staff Response Only)	
To DC-14 CAR only □	To DC-14 CAR and DC-15 IRS □
SANCA (ASSIVATE)	DATE
TAFF MEMBER NAME	

orm DC-135A	Commonwealth of Pennsylvania Department of Corrections
NMATE'S REQUEST TO STAFF MEMBER	
	INSTRUCTIONS Complete items number 1-8. If you follow instructions in
CLK3 Self File	preparing your request, it can be responded to more
K 1 Orlando	promptly and intelligently.
. To: (Name and Title of Officer)	2. Date:
orlando	12-10-20
. By: (Print Inmate Name and Number)	4. Counselor's Name:
KNOLOU Keisin Coit	Haizer
	5. Unit Manager's Name:
Inmate Signature	Oliveri
6. Work Assignment:	7. Housing Assignment:
6. Work Assignment.	gp /3
3. Subject: State your request completely but briefly.	
The de lite to intaking department	t of Callection Adm Policy does it neg out the person has to be an family and i am Not talking
Would like to in white send Ma	ney out the person has to be an
State that in order	family and i am Not talking
My Visiting list with face to be	
about the inmate haration	
" / Ota # Pagananga Only)	
9. Response: (This Section for Staff Response Only)	
H - Table 1	
	To DC-14 CAR and DC-15 IRS □
To DC-14 CAR only □	To DC-14 CAR and DC-15 IRS
To DC-14 CAR only □ STAFF MEMBER NAME	To DC-14 CAR and DC-15 IRS □ DATE — Signature

By Prt & Prc in a Camara Cell Any out OF Cell for Mental health Personal and or legal property if OF not only 13.8 I but Constitut a Form OF Dunishment For engaging	man Practice to Place inmates Cleared
3. By: (Print Inmate Name and Number) **INDUSTRICT CONF. Inmate Signature 6. Work Assignment: 8. Subject: State your request completely but briefly. G. **Industrict To Know is it Com By Prt & Prc in a Camara Cell Any cut of Cell for Mental health **Personal and of legal Proporty if Of Not only 13.8 i but Confitted The Confitted of Series of Agging	Baldwin 5. Unit Manager's Name: Calpino 7. Housing Assignment: BDH Sive details.
6. Work Assignment: 8. Subject: State your request completely but briefly. G I would like to know is it com By Prt & Prc in a Camara Cell Any out of Cell for Mental health Personal and or legal property if Of not only 13.8 i but conflicted a Eight of Punishment for engaging	Calpino 7. Housing Assignment: BDH Sive details. MGD Practice to Place inmates Cleared
6. Work Assignment: 8. Subject: State your request completely but briefly. G I would like to know is it com By Prt & Prc in a Camara Cell Any out of Cell for Mental health Personal and or legal property if Of not only 13.8 i but conflicted a Eight of Punishment for engaging	7. Housing Assignment: BDH Sive details. Man Practice to Place inmates Cleares
I latered like to know is it com By Prt & Prc in a Camara Cell Any out OF Cell for Mental health Personal and or legal Property if OF Not Only 13.8 i but Conflicted a Even of Dunishment for engaging	man Practice to Place inmates Cleared
I latered like to know is it com By Prt & Prc in a Camara Cell Any out OF Cell for Mental health Personal and or legal Property if OF Not Only 13.8 i but Confitted a Even OF Dunishment for engaging	man Practice to Place inmates Cleared
or a montal crisis And amounting +	Verbal response is Not an acceptable
9. Response: (This Section for Staff Response Only)	
To DC-14 CAR only □	To DC-14 CAR and DC-15 IRS □
TAFF MEMBER NAMEPrint	Taylor of the Parish and But the parish of the

INMATE'S REQUEST TO STAFF MEMBER LCX3 Self file	Commonwealth of Pennsylvania Department of Corrections INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.
1. To: (Name and Title of Officer)	2. Date: 12 29 20
3. By: (Print Inmate Name and Number) ***********************************	4. Counselor's Name: Bのしせいい 5. Unit Manager's Name:
Inmate Signature	Calpipo
6. Work Assignment:	7. Housing Assignment:
8. Subject: State your request completely but briefly. Giv	re details.
Profesty taken to the Main proferty laon Second: Was Never given a copy of a other fisons with those tems Clo's and taken My to Nos any other property inventored in unless the shift comunder has at had that all items wrongenty removed from several copies of My to de 153 to Not only Numerous pusons with My to Mail but this Main frogerty Coom is veryal response Not Needed due to Needing the 9. Response: (This Section for Staff Response Only)	nd other property officials have not white I was not prosent which reads My absence which contridicts policy given approval i respectfully as known hooks for reinburstment i have support that I have been through and others things to include legal well thank you for your time
To DC-14 CAR only □	To DC-14 CAR and DC-15 IRS □
STAFF MEMBER NAME	DATE



Initial Review Response

SCI Phoenix 1200 Mokychic Drive Collegeville, PA, 19426

03/25/2021 10:23

Inmate Name:	COIT, KEVIN	DOC #:	KX2601	
Facility:	Phoenix	Unit Location:	G/D	
Grievance #:	920589			

This serves to acknowledge receipt of your grievance to the assigned Grievance Officer. The response is as follows:

Decision: Grievance Denied

It is the decision of this Grievance Officer to uphold, deny, or uphold in part/deny in part the inmate's initial grievance. This response will include a brief rationale, a summary of the conclusion, any action taken to resolve the issue(s) raised in the grievance, and the relief sought.

Response:

I have reviewed your grievance. I spoke with the officer in question, when you were instructed to button your shirt, you refused to tuck-in the shirt. You then proceeded to walk back to the housing unit. The officer in question was in policy per inmate dress code. The officer did not harass or prevent you from going to medical pass. You chose to not go on medical pass by returning to the housing unit.

Signature:		
	I. Nivos	
Name:	J. Nyce	
Title:		
Approver:	K. Owens	
Date:	March 25, 2021	
CC. F. W. Oderson Consultant		

CC: Facility Grievance Coordinator
DC-15

DC-ADM 804, Inmate Grievance System Procedures Manual

Section 1 - Grievances & Initial Review, Attachment 1-D

KX2601 Grievance #:920589

COIT, KEVIN Page1 of 1

Issued: 1/26/2016 Effective: 2/16/2016

DC-804 Part 1

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS

FOR OFFICIAL USE 910509 GRIEVANCE NUMBER

49.21

OFFICIAL INMATE GRIEVANCE	A CONTRACTOR OF THE PARTY OF TH	
TO: FACILITY GRIEVANCE COORDINATOR	FACILITY:	DATE:
	CIONATURE OF INIMATE	3 23.21
FROM: (INMATE NAME & NUMBER)	SIGNATURE OF INMATE	
Kerin Cort KN 2601	HOUSING ASSIGNMENT	
WORK ASSIGNMENT:	90 107	•
INSTRUCTIONS:	1 20 101	1
1. Refer to the DC-ADM 804 for procedures on the in	mate grievance system.	The state of the s
2. State your grievance in Block A in a brief and under	erstandable manner.	sold of the second section of the second
3. List in Block B any action you may have taken to re	esolve this matter. Be sure	to include the identity of
staff members you have contacted.		
A. Provide a brief, clear statement of your grievance.	Additional paper may be us	sed, maximum two
pages (one DC-804 form and one one-sided 81/2")		
on 3-23-21 i was Scheduled for sickcall	when i was walkin	g to medocal
sax Klamas a John dee and Jane doe	told Plaintiff to bu	Hon up spring
1 or will explained that his de	c Shift was Fully	huttoned and that
the state of the s	re I have been horo	his deal of the work is
My Staff. Should write you up for	Filing that die	E Plaintiff has
talking about gricuance # 910767 the reported 59t Kremas on Numbrous or horass me for denial of medical treati	of is lying to sta	Tomas continues to
reported 59+ Khomas on Numbrous of	cassions and Dyr r	n : request
Inglass me Co Linial of Medical freat	MAT WILL I CHELLEN	4. 4
Practice & Manchary Cellet		
B. List actions taken and staff you have contacted, be	efore submitting this grieva	nce. I have spoken to
Mrs owers, PSS Nash, Mrs Smith Lt NY	ce	
C1000		
Your grievance has been received and will be proce	ssed in accordance with D	C-ADM 804.
(1/4/1/1)	4 2	
Signature of Facility Grievance Coordinator		Date
WHITE Facility Grievance Coordinator Copy GOLDEN ROD Inmate Copy CANAR	Y File Copy PINK Action I	Return Copy

DC-ADM 804, Inmate Grievance System Procedures Manual Section 1 - Grievances & Initial Review

Issued: 1/26/2016 Effective: 2/16/2016 Attachment 1-A

4.14

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAIN'TIFF							COURT CASE NU	JMBER	
	it Cal								
DEFENDANT	uin Cort						TYPE OF PROCE	SS	
J. Sorber						Civil			
	NAME OF I	NDIVIDUAL,	COMPANY, CO	ORPORATION,	ETC. TO SERV	E OR DESC	RIPTION OF PROPERTY	TO SEIZE OR CO	NDEMN
SERV		orber	2.000.00.7%						
A'	T ADDRESS (City, State and 2			400		
				rive Colle		(A 17)	426		
SEND NOTICE O	OF SERVICE COPY	TO REQUEST	ER AT NAME	AND ADDRESS	BELOW		Number of process served with this Fo		5
Kevin (Soit KX26	el					Number of parties		
1200 MG	KY Chick d	live Co	llege Vi	lle PA			served in this case Check for service	100 0	
19426	.,						on U.S.A.		
	UCTIONS OR OTHE			ILL ASSIST IN	EXPEDITING S	ERVICE (In	clude Business and Alter	nate Addresses,	
Signature of Atto	mey other Originator	requesting serv	rice on behalf of		NTIFF ENDANT	TELEPH	ONE NUMBER	3-29-8	21
	SPACE BEI	LOW FOR	USE OF U.S	S. MARSHA	L ONLY - D	O NOT W	RITE BELOW TH		
I acknowledge rec number of process (Sign only for US than one USM 28	ceipt for the total s indicated. M 285 if more	Total Process	District of Origin	District to Serve			SMS Deputy or Clerk	Date	
I hereby certify as individual, compa	nd return that I ha	ive personally s at the address	served , 🔲 hav shown above on	e legal evidence the on the indivi	of service, D l	nave executed corporation, o	d as shown in "Remarks", etc. shown at the address in	the process described nserted below.	d on the
☐ I hereby certi	fy and return that I am	unable to loca	te the individua	l, company, corp	oration, etc. nam	ed above (Se	e remarks below)		
Name and title of	individual served (if	not shown abov	ve)				Date	Time	am pm
Address (complet	e only different than s	hown above)					Signature of U.S.	Marshal or Deputy	
Service Fee	Total Mileage C	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	warding Fee	Total Charge:	s Advanc	e Deposits	Amount owed to U.S. N (Amount of Refund*)	/arshal* or	
REMARKS									

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

			5/1 or 10 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2			L 2000		380	
PLAINTIFF							COURT CASE NUI	MBER	
Ken	n Coif						1 1 2 2 2 2		
DEFENIENANT							TYPE OF PROCES	S	
. 10 <	sorber					400	Civil		
	NAME OF IND	IVIDUAL,	COMPANY, CO	ORPORATION,	ETC. TO SERVI	OR DESCR	UPTION OF PROPERTY	TO SEIZE OR CON	IDEMN
SERV	E Daime	Sor	per						
A'	T ADDRESS (Sire	et or RFD,	Apartment No.,	City, State and Z	IP Code)	IALLO	V.		
				de College		1940	Number of process	to be	S Walter
Committee of the Commit	OF SERVICE COPY TO	REQUEST	ER AT NAME	AND ADDRESS	BELOW		served with this For		到15
Kevin Coit	+ KX2601						Number of parties to	obe 1	15
1200 MO	kychick dr	ve					Served in this case Check for service	ege and	10
Colloga	11 DA 194	26					on U.S.A.		
SPECIAL INSTR	UCTIONS OR OTHER	INFORMA	TION THAT W	TLL ASSIST IN	EXPEDITING S	ERVICE (In	clude Business and Altern	ate Addresses,	
All Telephone No	umbers, and Estimated T	imes Avail	able for Service,	individ	ual Car	Pacity			
Of the second	mey other Originator req	nacting car	iee on behalf of	DECAL	NTIFF	TELEPHO	ONE NUMBER	DATE	
Signature of Affor	mey other Originator req	desting ser	ice on benait of	DEFI		Α.	10	3.29	21
	SDACE DELC	W FOR	HER OF HE			ONOTW	RITE BELOW TH		1/
I acknowledge re		al Process	District of	District to			SMS Deputy or Clerk	Date	
number of proces		al Process	Origin	Serve	Signature of A	Authorized O	SIMS Deputy of Ciera	Date	
(Sign only for US than one USM 28			No.	No.					
Throshy and (6) a	nd ratium that I D have	nersonally	served [] hav	e legal evidence	of service.	ave executed	as shown in "Remarks", the	he process described	on the
individual, compa	any, corporation, etc., at t	he address	shown above on	the on the indivi	dual, company, o	orporation, e	tc. shown at the address in	serted below.	7.00
Thereby certi	fy and return that I am ur	able to loc	ate the individua	il, company, corp	oration, etc. nam	ed above (Se	e remarks below)		
	individual served (if not						Date	Time	am
									pn pn
Address (complete	te only different than sho	wn above)					Signature of U.S. N	Marshal or Deputy	
ridalisas jesniyis	2 414	Managarine.					The production of the		
W. L. T. P.	Table Victory Control		20220022965	Tand Chann	e Advone	e Deposits	Amount owed to U.S. M	arshal* or	
Service Fee	Total Mileage Char (including endeavo	-	rwarding Fee	Total Charge	Advanc	e Deposits	(Amount of Refund*)	Miletall Mi	
	1,0000000000000000000000000000000000000						Y		
CHEST BY STORES		===							
REMARKS									

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STA	TES DISTRICT COURT for the eastern district OF PA
Kevin Coit Plaintiff V. Defendant	Civil Action No.
NOTICE OF A LAWSUIT AND RI	EQUEST TO WAIVE SERVICE OF A SUMMONS
To: Jame Solves [Name of the defendant or - if the defendant is a corporation of the defendant or - if the defendant is a corporation of the defendant is a corporation of the defendant is a corporation of the defendant of the defendant is a corporation of the defendant of the	on, partnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A copy of the complaint is attached.	entity you represent, in this court under the number shown above.
service of a summons by signing and returning the swaiver within days (give at least 30 days, or at least	from the court. It is a request that, to avoid expenses, you waive formal enclosed waiver. To avoid these expenses, you must return the signed ast 60 days if the defendant is outside any judicial district of the United States) tice was sent. Two copies of the waiver form are enclosed, along with means for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will is sent (see the date below) to answer the complaint the United States).	with the court. The action will then proceed as if you had been served I be served on you and you will have 60 days from the date this notice t (or 90 days if this notice is sent to you outside any judicial district of
served on you. And I will ask the court to require y	n the time indicated, I will arrange to have the summons and complaint you, or the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the	
I certify that this request is being sent to yo	ou on the date below.
Date:	Signature of the attorney or unrepresented party Kevin Cit Printed name
	1200 MoKChick drive Address Collegeville JA 194 26
	Collegeville PA 19426 E-mail address
	Telephone number

AO 399 (01/09) Waiver of the Service of Summons

UNITED STATES I	DISTRICT COURT the eastern district
Kevin Coit Plaintiff V. Defendant	Civil Action No.
WAIVER OF THE SEI	RVICE OF SUMMONS
To: Ja.Me Sorbes (Name of the plaintiff's attorney or unrepresented plaintiff)	
I have received your request to waive service of a su two copies of this waiver form, and a prepaid means of retur	nmmons in this action along with a copy of the complaint, ming one signed copy of the form to you.
I, or the entity I represent, agree to save the expense	of serving a summons and complaint in this case.
I understand that I, or the entity I represent, will jurisdiction, and the venue of the action, but that I waive any	keep all defenses or objections to the lawsuit, the court's y objections to the absence of a summons or of service.
I also understand that I, or the entity I represent, mu 60 days from, the date who United States). If I fail to do so, a default judgment will be	st file and serve an answer or a motion under Rule 12 within en this request was sent (or 90 days if it was sent outside the entered against me or the entity I represent.
	5
Date:	Signature of the attorney or unrepresented party
Printed name of party waiving service of summons	Kevin Ceit KX2601
Frinted name of party waiving service of summons	41,000,000
	1200 MakyChic drive
	1200 Maky Chil drive Address College ville PA 19426 E-mail address
	Telephone number

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF	77. 11. in					COURT CASE NUMBER			
EFENDANT	1. Salber					TYPE OF PROCESS			
SERVE AT	hensley Address (single	or RFD, Apart	ment No., Cit	ty, State and ZIP (Code)		ON OF PROPERTY TO) SEIZE C	R CONDEMN
	OF SERVICE COPY	TO REQUEST	TER AT NAM	ME AND ADDRE	ILE PA 1946 ESS BELOW	Numb	ber of process to be d with this Form 285	4	15
1	Keuin Coit laco Moke Coilegeville	KX3601					ber of parties to be d in this case	包	15
IL.	Collegeville	PA 10	rive 1426			Checon U.	k for service .S.A.		
Samples of A.	orney other Originator	roguestina cor	vice on behal	If of	btt a name	TELEPHO	INE NUMBER	DATE	7
SPACE I		USE OF	U.S. MA	ARSHAL O		N/ ot wi	A RITE BELOW	3	29.21 LINE
SPACE I	BELOW FOR				DEFENDANT NLY DO NO	N/ ot wi	A	3	
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SPACE I I acknowledge in number of proces (Sign only for Ushan one USM 2) I hereby certify on the individue I hereby certify on the individue Name and title of	BELOW FOR eceipt for the total ss indicated. SM 285 if more 85 is submitted) and return that I had a company, corporation that I is	Total Process ave personally ion, etc., at the am unable to lo finot shown above) ashown above)	District of Origin No served ,	District to Serve No	DEFENDANT ONLY DO NO Signature of Authority ce of service, have the individual, comp	OT WI orized USA e executed any, corporad above (S	ARITE BELOW AS Deputy or Clerk as shown in "Remark brition, etc. shown at the residing in of abode Date	s", the prohe address defendant	Date Date cess described inserted below. and discretion 's usual place

PRINT 5 COPIES:

- 1, CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Kalla -	12					COURT CASE NUMI	BER	
DEFENDANT	Kevin C. Surber						CIVIL	1 00000	
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' <i>k</i>	Revin Cold	KX26	s)				nber of parties to be ed in this case	100	15
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DISTURBUTED TO A 1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STATES DISTRICT COURT for the eastern district Plaintiff Civil Action No. V. NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS Charles hensley (Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service) Why are you getting this? A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached. This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed days (give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States) from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy. What happens next? If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States). If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service. Please read the enclosed statement about the duty to avoid unnecessary expenses. I certify that this request is being sent to you on the date below. Date: Signature of the attorney or unrepresented party

Telephone number

AO 399 (01/09) Waiver of the Service of Summons

UNITED STATES DISTRICT COURT for the eastern district of Civil Action No. WAIVER OF THE SERVICE OF SUMMONS (Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party Printed name of party waiving service of summons

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF							COURT CASE NUMBER		
DEFENDANT	1. Sorber						TYPE OF PROCESS		
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DISTRIBUTE TO: 1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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- 2. USMS RECORD
 3. NOTICE OF SERVICE
 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 5. ACKNOWLEDGMENT OF RECEIPT

AO 399 (01/09) Waiver of the Service of Summons

OIVIID DIVIDO	DISTRICT COURT
	the eastern district
of PA	
Kevin Coit	
Plaintiff	
V	Civil Action No.
Defendant	
. WAIVER OF THE SEF	VICE OF SUMMONS
_ 1 . 1	
To: Orlando (Name of the plaintiff's attorney or unrepresented plaintiff)	
	Color and the Action of Color
I have received your request to waive service of a sur two copies of this waiver form, and a prepaid means of return	nmons in this action along with a copy of the complaint, ing one signed copy of the form to you.
I, or the entity I represent, agree to save the expense of	of serving, a summons and complaint in this case.
I understand that I, or the entity I represent, will k jurisdiction, and the venue of the action, but that I waive any	eep all defenses or objections to the lawsuit, the court's
I also understand that I, or the entity I represent, must 60 days from , the date when	file and serve an answer or a motion under Rule 12 within this request was sent (or 90 days if it was sent outside the
United States). If I fail to do so, a default judgment will be en	tered against me or the entity I represent.
Date;	Ch
	Signature of the attorney or unrepresented party
Printed name of party waiving service of summons	Revia Coit KX AGO)
rentea name of party waiving service of summons	V. 11134 11370
	1200 M. Kuch a James
	Address
	College ville DA 19426
	E-mail address
	Telephone number
Duty to Avoid Unnecessary Expen	

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STATES DISTRICT COURT for the eastern district Plaintiff Civil Action No. Defendant NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS orlando To: (Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service) Why are you getting this? A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached. This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed days (give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States) from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy. What happens next? If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States). If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service. Please read the enclosed statement about the duty to avoid unnecessary expenses. I certify that this request is being sent to you on the date below. Date: Signature of the attorney or unrepresented party Kevin Coit KX260 Printed name

Telephone number

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Print Print A. A. Carrier and A. Car						COURT CASE NUMBER		
DEFENDANT	FENDANT J. Serber NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR I					TYPE OF PROCESS CIVI			
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Signature of Atte	omey other Originato	r requesting se	rvice on beha	lf of:	PLAINTIFF	ТЕГЕРНО	INE NUMBER	DATE	
	~	>			DEFENDANT	NI	A	3.2	***************************************
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DISTRIBUTE TO: 1. CLERK OF THE COURT 2, USMS RECORD

3. NOTICE OF SERVICE

BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 11/13

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

SERVE AT ADDR SERVE AT ADDR SEND NOTICE OF SERV Calle SPECIAL INSTRUCTIO All Telephone Numbers, d SPACE BELO I acknowledge receipt for number of process indicate (Sign only for USM 285 if than one USM 285 is subn I hereby certify and return	CONCAS ORESS (Street or R ORES	REPLAPATION TO REQUESTER AT NO. REQUESTER AT NO	City, State and ZIP O MOKYCH NAME AND ADDR HAT WILL ASSIS' Service): 1035	Code) IC CYIVE (ESS BELOW F IN EXPEDITING SE VI GUAL CA	Number of process to be served with this Form. Number of parties to be served in this case. Check for service on U.S.A.	19496 be 285
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☐ I hereby certify and r	d return that I am u	nable to locate the in	idividual, company,	corporation, etc. name	d above (See remarks below)
Name and title of individu	dual served (if not	shown above)			A person o then residir of abode	of suitable age and discretion ng in defendant's usual place
Address (complete only di	different than show	wn above)			Date	Time
	Ÿ				Signature of U.	S. Marshal or Deputy
	al Mileage Charges ading endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. M (Amount of Refund*)	Marshal* or
REMARKS:					The state of the s	20100

DISTRIBUTE TO: 1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed, Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STAT	res District Court for the eastern district f fa
Revin Cit Plaintiff V. Jamie Serber Defendant	Civil Action No.
To: Octoos	PUEST TO WAIVE SERVICE OF A SUMMONS partnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A copy of the complaint is attached. This is not a summons, or an official notice from service of a summons by signing and returning the enclassion of the summons of the service of the summons by signing and returning the enclassion of the summons of the summons of the service of the summons of the summo	on the court. It is a request that, to avoid expenses, you waive formal closed waiver. To avoid these expenses, you must return the signed to days if the defendant is outside any judicial district of the United States)
a stamped, self-addressed envelope or other prepaid me What happens next?	th the court. The action will then proceed as if you had been served
on the date the waiver is filed, but no summons will be is sent (see the date below) to answer the complaint (or the United States).	e served on you and you will have 60 days from the date this notice or 90 days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the served on you. And I will ask the court to require you, Please read the enclosed statement about the d	he time indicated, I will arrange to have the summons and complaint, or the entity you represent, to pay the expenses of making service. luty to avoid unnecessary expenses.
I certify that this request is being sent to you o	
Date:	Signature of the attorney or unrepresented party Kelin Ceit Kk 2601 Printed name
	Collegeville PA 19426
	Telephone number

AO 399 (01/09) Waiver of the Service of Summons

UNITED STATES DISTRICT COURT

for the eastern district

A9 70

kevin coit Plaintiff	5
٧.) Civil Action No
Jamie Surber	
Defendant	

WAIVER OF THE SERVICE OF SUMMONS

To: Owens	
(Name of the plaintiff's attorney or unrepresented plaintiff,)
I have received your request to waive service of a two copies of this waiver form, and a prepaid means of retu	summons in this action along with a copy of the complaint, urning one signed copy of the form to you.
I, or the entity I represent, agree to save the expens	se of serving a summons and complaint in this case.
I understand that I, or the entity I represent, will jurisdiction, and the venue of the action, but that I waive at	Il keep all defenses or objections to the lawsuit, the court's ny objections to the absence of a summons or of service.
l also understand that I, or the entity I represent, m 60 days from, the date wi United States). If I fail to do so, a default judgment will be	nust file and serve an answer or a motion under Rule 12 within then this request was sent (or 90 days if it was sent outside the entered against me or the entity I represent.
Date:	Signature of the attorney or unrepresented party
	Kevin Cit KX2601
Printed name of party waiving service of summons	rrinea name
	1200 Moky Chic drive
	1200 Moky Chic drive Address College Ville PA 19426 E-mail address
	Telephone number

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

Case 2:21-cv-01568-NIQA Document 2-2 Filed 04/01/21 Page 27 of 72

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF	MEN 102 12					CO	URT CASE NUMBE	ER.	
EFENDANT	uin Ceit umie Soll	per		on I TION PRO	TO SERVE OR DES		PE OF PROCESS C. V./	SEIZE OF	CONDEMN
SERVE ADD	NYCE: DRESS (Street or RI	D, Apartm	ent No., City	, State and ZIP Co	ode)	and w			
END NOTICE OF SE	RVICE COPY TO F	EQUESTI EQUESTI	ER AT NAM	E AND ADDRES	SS BELOW	Numbe served	r of process to be with this Form 285	15	
11 75 7 47 17 17	n Coit Kill		«Va				r of parties to be in this case	15	
	s MokChic egeville Pf	-				Check on U.S	for service .A.		
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PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

NOTICE OF SERVICE
 HELLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Case 2:21-cv-01568-NIQA Document 2-2 Filed 04/01/21 Page 28 of 72

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

The state of the s					COURT CASE NUMB	ER
EFENDANT	n Cost mie Sor	ber	prop (ma), pro	TO SERVE OF DESCRI	TYPE OF PROCESS Civil RIPTION OF PROPERTY TO	D SEIZE OR CONDEMN
CEDVE ALL	Ce:	Apartment No., C	City, State and ZIP Co			
END NOTICE OF SERVI	CE COPY TO RI	EQUESTER AT N	AME AND ADDRES	S BELOW	Number of process to be served with this Form 285	15
Kevin C	Coit KX2 McKChic	601 Kdrive			Number of parties to be served in this case	15
1 Colleg	eville PA	19426			Check for service on U.S.A.	
Signature of Attorney other				DEFENDANT	ELEPHONE NUMBER N/A	3.29.21
		FOFUS N	IARSHAL O	NLY DO NO	T WRITE BELOV	O TOTAL OF TAKE
I acknowledge receipt for t number of process indicate	the total Total	Process District of Origin	TO A TOTAL OF STREET,	Signature of Authoriz	zed USMS Deputy or Clerk	V THIS LINE Date
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PRINT 5 COPIES:

1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/80 AO 399 (01/09) Waiver of the Service of Summons

United State	S DISTRICT COURT
	for the eastern district
49 30	
Keyin Ceit Plainiff Y.	}
V.	Civil Action No.
lamie Serber)
Defendant)
WAIVER OF THE S	ERVICE OF SUMMONS
To: NYCe	
(Name of the plaintiff's attorney or unrepresented plaintiff)	
I have received your request to waive service of a s two copies of this waiver form, and a prepaid means of retu	nummons in this action along with a copy of the complaint, irning one signed copy of the form to you.
I, or the entity I represent, agree to save the expens	e of serving a summons and complaint in this case.
I understand that I, or the entity I represent, will jurisdiction, and the venue of the action, but that I waive an	keep all defenses or objections to the lawsuit, the court's y objections to the absence of a summons or of service.
I also understand that I, or the entity I represent, mu 60 days from, the date wh United States). If I fail to do so, a default judgment will be	est file and serve an answer or a motion under Rule 12 within en this request was sent (or 90 days if it was sent outside the entered against me or the entity I represent.
Date:	
	Signature of the attorney or unrepresented party
Printed name of party waiving service of summons	Levin Co. + KNOWOO!
Standard and Annual and March	
	Collegeville PA 19426 Email address
	O. H. A.
	E-mail address
	Telephone number
The second secon	GEOM DU CENTANES.
Duty to Avoid Unnecessary Ex	penses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

United States District Court for the eastern district Civil Action No. NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS To: (Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service) Why are you getting this? A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached. This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed days (give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States) from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy. What happens next? If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States). If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service. Please read the enclosed statement about the duty to avoid unnecessary expenses. I certify that this request is being sent to you on the date below. Date: Signature of the attorney or unrepresented party

Telephone number

U.S. Department of Justice

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" United States Marshals Service COURT CASE NUMBER PLAINTIFF TYPE OF PROCESS DEFENDANT VIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Number of process to be SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW served with this Form 285 Number of parties to be Kevin Coit KX2601 served in this case 1200 Mokenick drive Check for service Collegeville PA 19426 on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Official Capacity 3.29.21 PLAINTIFF TELEPHONE NUMBER Signature of Attorney other Originator requesting service on behalf of DEFENDANT NIA SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE Date District to Signature of Authorized USMS Deputy or Clerk I acknowledge receipt for the total Total Process District of Serve number of process indicated. Origin (Sign only for USM 285 if more No than one USM 285 is submitted) I hereby certify and return that I 🔲 have personally served, 🔲 have legal evidence of service, 🔲 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. ☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Time am Name and title of individual served (if not shown above) pm pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above)

Total Charges

Forwarding Fee

Amount owed to U.S. Marshal* or

(Amount of Refund*)

Advance Deposits

Total Mileage Charges

(including endeavors)

Service Fee

REMARKS

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		h.			×	C	COURT CASE NUMB	ER	
DEFENDANT	J. Sorber						CON		<u> </u>
SERVE AT	CALPINE ADDRESS (Street	0 et or RFD, Apar	tment No., Ci	ity, State and ZIP	c to serve or des Code) wille fA 19			SEIZE OI	R CONDEMN
VI WILLIAM TO AND	OF SERVICE COP	Y TO REQUES	TER AT NA	ME AND ADDRI	ESS BELOW	Numb	per of process to be d with this Form 285	4	15
1	Kevin Coit 1200 Mo	KX2601	drive				per of parties to be d in this case	de	15
[0	Collegeville	PA 194	12			Check on U.	c for service S.A.		
Signature of Att	tomey other Originat	or requesting se	rvice on beha		PLAINTIFF DEFENDANT	TELEPHO	NE NUMBER	DATE 3.5	29.21
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DISTRIBUTE TO:

1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

AO 399 (01/09) Waiver of the Service of Summons for the eastern district Plaintiff Civil Action No. ٧. Defendant WAIVER OF THE SERVICE OF SUMMONS (Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party Kevin (Printed name of party waiving service of summons

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Sumr	mons
for	DISTRICT COURT The eastern district
Kevin Coit Plaintiff V. Jamie Sorber Defendant)) Civil Action No.
NOTICE OF A LAWSUIT AND REQUES	ST TO WAIVE SERVICE OF A SUMMONS
To: Calpino (Name of the defendant or - if the defendant is a corporation, partners)	ership, or association - an officer or agent authorized to receive service)
Why are you getting this? A lawsuit has been filed against you, or the entity you account to a copy of the complaint is attached.	you represent, in this court under the number shown above.
service of a summons by signing and returning the enclosed	e court. It is a request that, to avoid expenses, you waive formal d waiver. To avoid these expenses, you must return the signed ys if the defendant is outside any judicial district of the United States) as sent. Two copies of the waiver form are enclosed, along with a for returning one copy. You may keep the other copy.
on the date the waiver is filed, but no summons will be set is sent (see the date below) to answer the complaint (or 90 the United States).	ne court. The action will then proceed as if you had been served yed on you and you will have 60 days from the date this notice days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the ti- served on you. And I will ask the court to require you, or	me indicated, I will arrange to have the summons and complaint the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty	to avoid unnecessary expenses.
I certify that this request is being sent to you on the	he date below.
Date:	Signature of the attorney or unrepresented party Kerin Coit KN 2611 Printed name 1200 MokChick drive Address College ville PA 19426
	E-mail address Telephone number

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	evin Co.t						COURT CASE NUM	BER	
DEFENDANT	mie Sort						TYPE OF PROCESS		
SERVE AT	KleMa.	S RFD, Apart	tment No., C	City, State and ZIP	Code)	(Q.0.5)	ON OF PROPERTY T	O SEIZE	OR CONDEMN
SEND NOTICE OF S		REQUEST	TER AT NA	ME AND ADDR	ess BELOW	Num	aber of process to be ed with this Form 285	15	*
	n C. + K						ber of parties to be ed in this case	15	
LC _o	llegeville	PA	19426	ģ		Chec on U	k for service .S.A.		
Signature of Attorney	other Originator req	uesting serv	vice on beha		Induct Cap		NE NUMBER	DATE	Feld
6				C	DEFENDANT			1000	29.21
SPACE BEL acknowledge receipt number of process indi Sign only for USM 28 than one USM 285 is s	for the total Total icated.		District of Origin	District to Serve	Signature of Autho		RITE BELOW	THIS	Date
							as shown in "Remarks ration, etc. shown at th		
I hereby certify ar	nd return that I am u	nable to loc	ate the indiv	idual, company,	corporation, etc. name	d above (S	ee remarks below)		
Name and title of indiv	vidual served (if not	shown abov	ie)				A person of suite then residing in o of abode		
Address (complete only	y different than show	vn above)					Date	Time	ar
							Signature of U.S. Ma	rshal or D	N 400 A 100
							A STATE OF STATE OF		eputy
	tal Mileage Charges luding <i>endeavors)</i>	Forwardi	ng Fee	Total Charges	Advance Deposits		nt owed to U.S. Marsha int of Refund*)		eputy
		Forwardi	ng Fee	Total Charges	Advance Deposits				Peputy

- DISHRIBUNG WOR 1. CLERK OF THE COURT
 - 2. USMS RECORD
 - 3. NOTICE OF SERVICE
 - BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Ka	4-2					COURT CASE NUM	BER	
DEFENDANT	Jamie So	other					CV//		
SERVE AT	Kle M ADDRESS (Street	et or RFD, Apar	tment No., C	ity, State and ZIP	Code)		ON OF PROPERTY T	O SEIZE O	R CONDEMN
SEND NOTICE	OF SERVICE COP	Y TO REQUES	TER AT NA	ME AND ADDR	CILLE PA 19	Num	aber of process to be ed with this Form 285	15	
	evin Coit						ber of parties to be ed in this case	15	
Ľ	College V	ile PA	19426	6	was manaka ing manaka na	E-7500	ck for service .S.A.		
6	orney other Originate				DES ENDIEN	N	ONE NUMBER //A RITE BELOW		29°21
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DISTRIBUTE TO:

- 1. CLERK OF THE COURT 2. USMS RECORD
- 3. NOTICE OF SERVICE
- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

UNITED STATES	DISTRICT COURT
for	the Constern district
OF PA	
Kowin Cut)
Kevin C.A. Plaintiff v.) Civil Action No.
Lamia Serber)
Defendant	
NOTICE OF A LAWSUIT AND REQUES	T TO WAIVE SERVICE OF A SUMMONS
- 1610 marc	
(Name of the defendant or - if the defendant is a corporation, partner	ership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity y A copy of the complaint is attached.	ou represent, in this court under the number shown above.
service of a summons by signing and returning the enclosed	court. It is a request that, to avoid expenses, you waive formal waiver. To avoid these expenses, you must return the signed as if the defendant is outside any judicial district of the United States) is sent. Two copies of the waiver form are enclosed, along with for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will be serv is sent (see the date below) to answer the complaint (or 90 the United States).	e court. The action will then proceed as if you had been served yed on you and you will have 60 days from the date this notice days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the tin served on you. And I will ask the court to require you, or the	ne indicated, I will arrange to have the summons and complaint he entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty t	to avoid unnecessary expenses.
I certify that this request is being sent to you on the	e date below.
Date:	Signature of the attorney or unrepresented party
	Kevin Cit KX2601
	1200 MokChick drive Address Collegeville PA 19426
	Collegeville PA 19426 E-mail address
	Telephone number

UNITED STATES DISTRICT COURT

for the eastern district

Plaintiff

v.) Civil Action No.

WAIVER OF THE	SERVICE OF SUMMONS
To: Klemas	
(Name of the plaintiff's attorney or unrepresented plain	niff)
I have received your request to waive service of two copies of this waiver form, and a prepaid means of	a summons in this action along with a copy of the complaint, returning one signed copy of the form to you.
I, or the entity I represent, agree to save the exp	ense of serving a summons and complaint in this case.
I understand that I, or the entity I represent, jurisdiction, and the venue of the action, but that I waive	will keep all defenses or objections to the lawsuit, the court's e any objections to the absence of a summons or of service.
I also understand that I, or the entity I represent 60 days from, the date United States). If I fail to do so, a default judgment wil	, must file and serve an answer or a motion under Rule 12 within when this request was sent (or 90 days if it was sent outside the I be entered against me or the entity I represent.
Market and the Market of the M	
Date:	Signature of the attorney or unrepresented party
	Kevin Coit KX2601
Printed name of party waiving service of summons	Printed name
	Colle geville pp. 19426 E-mail address
	Collegeville PA 19426 E-mail address

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	on ot						COURT CASE NUM	BER	
DEFENDANT	l-sorber						C VII		
SERVE AT	ADDRESS (Street	d & or RFD, Apar	tment No., C	City, State and ZIP	Code)	dv. ty	ON OF PROPERTY T	O SEIZE (OK CONDEMN
	OF SERVICE COPY	ROCKY ChiCK Crive Collegeville PA					aber of process to be ed with this Form 285	le le	3 9 15
'Ka	evin Coit k Doo Mokch	1X2601	10				nber of parties to be ed in this case	10	15
	Collegeville					177	ck for service J.S.A.		
Signature of Attor	rney other Originator	requesting ser	rvice on beha	alf of:	PPEAINTIFF	ТЕСЕРНО	ONE NUMBER	DATE	ausv.
2	8				DEFENDANT	NI	'A	3.	29-21 LINE
SPACE B I acknowledge reconnumber of process (Sign only for US.	SELOW FOR ceipt for the total as indicated. CM 285 if more			ARSHAL O	DEFENDANT NLY DO N	N/OT W	ONE NUMBER RITE BELOW MS Deputy or Clerk	3.	
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- DISTIRIBUTED TROP 1. CLERK OF THE COURT 2. USMS RECORD

 - 3. NOTICE OF SERVICE
 - BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

All Telephone Numbers, and Estimated Times Available for Service): individual (L paid) Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF DEFENDANT SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NO	DESCRIPTION OF E Number of proserved with the Served in this Check for serven u.s.A. SERVICE (Include B. Co. C. + 9) TELEPHONE NUM N/A	arties to be arties to be sease Business and Alternate Artification of the sease Business and Business Artification of the sease Business and Business Artification of the sease Business and Business Artification of the sease Business Artification of the	1 15
SERVE AT DILLEGAS ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1200 MelChick drive Collegaville PA SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Kevin Ceit KX2601 As Kerick 1200 Melchick drive Collegeville PA 19426 SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SEI All Telephone Numbers, and Estimated Times Available for Service): individual Chip Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF Defendant SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NO	Number of preserved with the Number of paserved in this Check for ser on U.S.A. SERVICE (Include In Control of the Control of	arties to be arties to be sease Business and Alternate Artification of the sease Business and Business Artification of the sease Business and Business Artification of the sease Business and Business Artification of the sease Business Artification of the	1 15 1 15
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Signature of Attorney other Originator requesting service on behalf of: SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NO	on U.S.A. SERVICE (Include B. Per C1+9 TELEPHONE NUM	Business and Alternate A	
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	ALLI VVKIIK		29-21 LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process District of Serve Origin No	norized USMS Deput		Date
hereby certify and return that I have personally served, have legal evidence of service, have en the individual, company, corporation, etc., at the address shown above on the on the individual, company	ve executed as shown apany, corporation, et	n in "Remarks", the proce	ess described ascrted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	ed above (See remar	rks below)	
Name and title of individual served (if not shown above)	the	person of suitable age and en residing in defendant's abode	
Address (complete only different than shown above)	Date	Time	□ at
	Signatu	ure of U.S. Marshal or De	puty
Service Fee Total Mileage Charges including endeavors) Forwarding Fee Total Charges Advance Deposits	s Amount owed to (Amount of Ref	to U.S. Marshal* or fund*)	

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 11/13

UNITED STATES DISTRICT COURT for the eastern district Civil Action No. Defendant WAIVER OF THE SERVICE OF SUMMONS the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. 60 days from Date: Signature of the attorney or unrepresented party Printed name of party waiving service of summons Address

Duty to Avoid Unnecessary Expenses of Serving a Summons

E-mail address

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

UNITED STATE	ES DISTRICT COURT
7.	for the Eastern district
OF PY	A
Kevin Ceit Plaintiff Kerr Cort Jamie Serber	Civil Action No.
	UEST TO WAIVE SERVICE OF A SUMMONS
To: gillards	partnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	sarmosmp, or careers to the same state of the sa
A copy of the complaint is attached.	tity you represent, in this court under the number shown above.
service of a summons by signing and returning the enclusiver within days (give at least 30 days, or at least 60	In the court. It is a request that, to avoid expenses, you waive formal losed waiver. To avoid these expenses, you must return the signed follows if the defendant is outside any judicial district of the United States) was sent. Two copies of the waiver form are enclosed, along with eans for returning one copy. You may keep the other copy.
What happens next?	
	th the court. The action will then proceed as if you had been served a served on you and you will have 60 days from the date this notice is sent to you outside any judicial district of
If you do not return the signed waiver within th served on you. And I will ask the court to require you,	ne time indicated, I will arrange to have the summons and complaint, or the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the de	uty to avoid unnecessary expenses.
I certify that this request is being sent to you o	on the date below.
Date:	Signature of the attorney or unrepresented party Kevin Cit KX Hal
	1200 MekChick drive Address College ville PA 19426 E-mail address
	Telephone number

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF 1	211.4.			COURT CASE NUMBER					
Kevin C	art				TP	VEC OF PROCESS			
DEFENDANT	& Sorber						TYPE OF PROCESS		
NAME OF INDI	VIDUAL, COM	PANY, CORP	ORATION, ETC	, TO SERVE OR DE	SCRIPTION		SEIZE OR C	CONDEMN	
SERVE Spivey									
AT ADDRESS (Sure	t or RFD, Apart	tment No., City	y, State and ZIP (Cade)					
1200 MUI	Chick	drive	Collegevi	11e PA 199	126				
END NOTICE OF SERVICE COP	ND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						100	15	
Kevin Coit 1200 Mok Collegevil	K K2Gol	i de la companya de l				er of parties to be in this case	10 15	5	
1200 MOK	chicko	rive			20.0	C 1 C C	100		
(Collegevil	e PA 1	9426			on U.S	for service S.A.	- 11		
SPECIAL INSTRUCTIONS OR O	THER INFORM	ATION THA	T WILL ASSIST	IN EXPEDITING SE	RVICE (In	clude Business and	Alternate Addi	resses,	
Signature of Attorney other Originat	or requesting se	rvice on behal		PLAINTIFF	TELEPHON	NE NUMBER	DATE	2.21	
	==!			DEFENDANT	N	IA	3.20		
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PRINT 5 COPIES:

1. CLERK OF THE COURT

2. USMS RECORD

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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF						C	COURT CASE NUMB	ER		
10100101	Kevin Co	it								
DEFENDANT	AND THE PERSON AND TH						TYPE OF PROCESS			
	Jaime &	Sorber				NON INDIA	Civil	V CEISE O	B CONDENS	
SERVE	Soive	¥		ity, State and ZIP		SCRIPTIC	ON OF PROPERTY TO) SEIZE O	K CONDENIN	
AT	1200				ilegeville PA	1945	76			
	OF SERVICE COP	Y TO REQUES	TER AT NA	ME AND ADDR	ESS BELOW	Numb	per of process to be d with this Form 285		15	
- 6.1	Kevin Coit Doc Mokel Collegeville	KX2Goi					per of parties to be I in this case	100	15	
	Collegeville	PA 194	r 126			Check on U.	c for service S.A.	(
Signature of Att	torney other Originat	or requesting ser	vice on beha	10 at	PLAINTIFF		NE NUMBER	DATE 3	20:21	
SPACE I	BELOW FOI		U.S. M.	ARSHAL O	PLAINTIFF DEFENDANT DNLY DO NO Signature of Author	OT WE	A RITE BELOW	3.	29-21 LINE Date	
SPACE I	BELOW FOI	R USE OF	U.S. M.	ARSHAL C	DNLY DO N	OT WE	A RITE BELOW	3.	LINE	
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PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00

UNITED STATES DIS	
OF PA	enstern district
Nevin Cit Plaintiff V. Jamie Serber Defendant	Civil Action No.
NOTICE OF A LAWSUIT AND REQUEST TO	WAIVE SERVICE OF A SUMMONS
To: Ofivey (Name of the defendant or - if the defendant is a corporation, partnership, or	association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity you repr A copy of the complaint is attached.	esent, in this court under the number shown above.
This is not a summons, or an official notice from the court. service of a summons by signing and returning the enclosed waiver waiver within days (give at least 30 days, or at least 60 days if the defrom the date shown below, which is the date this notice was sent. a stamped, self-addressed envelope or other prepaid means for returning the court.	To avoid these expenses, you must return the signed efendant is outside any judicial district of the United States) Two copies of the waiver form are enclosed, along with
What happens next?	
If you return the signed waiver, I will file it with the court. on the date the waiver is filed, but no summons will be served on y is sent (see the date below) to answer the complaint (or 90 days if t the United States).	ou and you will have 60 days from the date this notice
If you do not return the signed waiver within the time indicated on you. And I will ask the court to require you, or the entity	ated, I will arrange to have the summons and complaint you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty to avoid	unnecessary expenses.
I certify that this request is being sent to you on the date be	elow.
Date:	Signature of the attorney or unrepresented party Kevin Cost KX2661 Printed name
	Ollegeville PA 19426
	E-mail address

UNITED STATES DISTRICT COURT

for the Eastern district

Kevin Coit

Plaintiff

V.

Jamie Sorbet

Defendant

Of VA

Civil Action No.

WAIVER OF THE SERVICE OF SUMMONS

	pive	
-	Name o	the plaintiff's attorney or unrepresented plaintiff,

I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you.

I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case.

I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service.

I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within 60 days from _______, the date when this request was sent (or 90 days if it was sent outside the United States). If I fail to do so, a default judgment will be entered against me or the entity I represent.

Date:

Signature of the attorney or unrepresented party

Kevin Coif KSA601

Printed name of party waiving service of summons

Printed name

1200 MekyChic drive
Address
Collegeville PA 19426
E-mail address

Telephone number

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF	Kevin Ceit						COURT CASE NUMBER			
DEFENDANT	Serber					TYPE OF PROCESS Civil ION OF PROPERTY TO SEIZE OR COND				
SERVE SADDRESS A	Net Treet or RFD, Apart	ment No., Cit	y, State and ZIP (Code)		N OF PROPERTY TO	O SEIZE C	BR CONDEMN		
SEND NOTICE OF SERVICE C	NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						15	5		
	t KX260				0.0001.00	er of parties to be in this case	15			
	ville PA		6		Check on U.	t for service S.A.				
SPACE BELOW F	OR USE OF		E	PLAINTIFF DEFENDANT NLY DO NO	T WF		-	29.21 LINE		
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PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF	4.7				COURT CASE N	JMBER	
DEFENDANT	TVPE (NEMO!
SERVE ADDRESS (Sire	et or RFD, Apart	ment No., City	y, State and ZIP C	Code)	Dis	Y 10 SEIZE OR CONE	EMIN
12co @ BEND NOTICE OF SERVICE COR	MokChi Y TO REQUEST	ess Below	Number of process to be served with this Form				
Kevin Coit		ive			Number of parties to b served in this case	15	
Collegev					Check for service on U.S.A.		
SPACE BELOW FO			RSHAL O	DEFENDANT NLY DO NO	TELEPHONE NUMBER OT WRITE BELI ized USMS Deputy or Cle		
SPACE BELOW FO I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more	R USE OF	U.S. MA	RSHAL O	DEFENDANT NLY DO NO	T WRITE BEL	3.29.2 DW THIS LINI	
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- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

UNITED STATES DISTRICT COURT for the eastern district of A Kevin Ceit Plaintiff v. V. Civil Action No. WAIVER OF THE SERVICE OF SUMMONS Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party Printed name of party waiving service of summons

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

UNITED STATES DISTR	ICT COURT
OF PA	
Kevil Coit Plaintiff Plaintiff Civi Defendant	l Action No.
NOTICE OF A LAWSUIT AND REQUEST TO WA	IVE SERVICE OF A SUMMONS
To: Koelet (Name of the defendant or - if the defendant is a corporation, partnership, or asso	ciation - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity you represe A copy of the complaint is attached.	nt, in this court under the number shown above.
This is not a summons, or an official notice from the court. It is service of a summons by signing and returning the enclosed waiver. To waiver within days (give at least 30 days, or at least 60 days if the defend from the date shown below, which is the date this notice was sent. Two a stamped, self-addressed envelope or other prepaid means for returning	dant is outside any judicial district of the United States)
What happens next?	- Control of the Control Development
If you return the signed waiver, I will file it with the court. The on the date the waiver is filed, but no summons will be served on you is sent (see the date below) to answer the complaint (or 90 days if this the United States).	notice is sent to you outside any judicial district of
If you do not return the signed waiver within the time indicate served on you. And I will ask the court to require you, or the entity you	d, I will arrange to have the summons and complaint ou represent, to pay the expenses of making service.
Please read the enclosed statement about the duty to avoid un	necessary expenses.
I certify that this request is being sent to you on the date belo	W,
Date:	Signature of the attorney or unrepresented party Kevin Co. + KN 260/ Printed name
	1200 MokChick drive Address Collegeville PA 19426
	College Ville PA 19426 E-mail address
	Telephone number

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF							COURT CASE NUMBER		
EFENDANT Jamie Sorber NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR						TYPE OF PROCESS CIVIL			
SERVE {	Terra ADDRESS (Street	or RFD, Aparti	ment No., City	v, State and ZIP C	Code)	<u> </u>	OF PROPERTY TO	SEIZE O	R CONDEMN
1200 MokChick drive Collegeville PA 194, and notice of service copy to requester at NAME and Address below							er of process to be with this Form 285	15	
1 K	Gern Cort	ick dri	ve.				er of parties to be in this case	15	
	Collegevill	e PA 19	426			Check on U.S	for service S.A.		
	rney other Originato	r requesting ser	vice on behal	-	PLAINTIFF DEFENDANT	TELEPHON	NE NUMBER	DATE	2: 21
CDACED	SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO cknowledge receipt for the total mber of process indicated, ign only for USM 285 if more Total Process District of Origin Serve Signature of					OT WR	ITE BELOW	-	29.21 LINE
acknowledge re number of proces Sign only for US	ceipt for the total ss indicated. SM 285 if more		District of	District to	/ 15 E & SHO 2013 / 10 / 10			-	
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- 1. CLERK OF THE COURT 2. USMS RECORD
- USMS RECORD
 NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed, Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00 SEL

SM

2/1 d (

UNITED STATES DIS	TRICT COURT Pastern district
Revin Cit Plaintiff The Sorber Defendant	Civil Action No.
NOTICE OF A LAWSUIT AND REQUEST TO	WAIVE SERVICE OF A SUMMONS
To: HIVA (Name of the defendant or - if the defendant is a corporation, partnership, or	r association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity you rep A copy of the complaint is attached.	resent, in this court under the number shown above.
This is not a summons, or an official notice from the court. service of a summons by signing and returning the enclosed waive waiver withindays (give at least 30 days, or at least 60 days if the after the date shown below, which is the date this notice was sent. a stamped, self-addressed envelope or other prepaid means for returning the court.	r. To avoid these expenses, you must return the signed defendant is outside any judicial district of the United States) Two copies of the waiver form are enclosed, along with
What happens next?	
If you return the signed waiver, I will file it with the court, on the date the waiver is filed, but no summons will be served on is sent (see the date below) to answer the complaint (or 90 days if the United States).	you and you will have 60 days from the date this notice
If you do not return the signed waiver within the time indices served on you. And I will ask the court to require you, or the entity	eated, I will arrange to have the summons and complaint y you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty to avoid	l unnecessary expenses.
I certify that this request is being sent to you on the date b	elow.
Date:	Signature of the attorney or unrepresented party Kevin Ceit KKX 201 Printed name
	1200 McKchick drive Address Collegeville PA 19426
	E-mail address

UNITED STATES DISTRICT COURT

of pa

Kevin Coit	
Plaintiff	
ν.	Civil Action No.
Jamie Scrber	}
Defendant	Control of the second
WAIVER OF THE SE	RVICE OF SUMMONS
To: tessa	_
(Name of the plaintiff's attorney or unrepresented plaintiff)	
I have received your request to waive service of a s two copies of this waiver form, and a prepaid means of retu	ummons in this action along with a copy of the complaint, ming one signed copy of the form to you.
I, or the entity I represent, agree to save the expense	e of serving a summons and complaint in this case.
I understand that I, or the entity I represent, will jurisdiction, and the venue of the action, but that I waive an	keep all defenses or objections to the lawsuit, the court's y objections to the absence of a summons or of service.
60 days from the date wh	ast file and serve an answer or a motion under Rule 12 within en this request was sent (or 90 days if it was sent outside the
United States). If I fail to do so, a default judgment will be	entered against me or the entity I represent.
Date:	(/2)
	Signature of the attorney or unrepresented party
	Kevin Coit KX2Cul
Printed name of party waiving service of summons	Printed name
	1200 MEXYCHIL drive
	Address
	1200 Me KYChik dvive Address Collegeville PA 19426 E-mail address
	Telephone number
	AAS Out Owner,

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

LAINTIFF KALLA	1.1	CC	COURT CASE NUMBER					
Rev. A DEFENDANT DAMIE	TO SERVE OR DES	TYPE OF PROCESS CIVI OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			R CONDEMN			
CONTRACTOR OF THE STATE OF THE	S (Street or RFD, Ap	artment No., City	y, State and ZIP			or thornact is		
SEND NOTICE OF SERVICE	E COPY TO REQU	ESTER AT NAM	ME AND ADDRE		Numbe	er of process to be with this Form 285	15	5
No Wood	Ceit KNDG	k driv	e			er of parties to be in this case	15	
Coile	jeville PA	19426			Check on U.S	for service .A.		
iignature of Altorney other (Originator requesting	service on behalf	- L	PLAINTIPP	TELEPHON	E NUMBER	DATE	
SPACE BELOW acknowledge receipt for the number of process indicated,	FOR USE O	F U.S. MA	Ē	DEFENDANT	T WR	ITE BELOW	3.	29.21 LINE
SPACE BELOW acknowledge receipt for the number of process indicated, Sign only for USM 285 if me han one USM 285 is submitte	FOR USE O	F U.S. MA ss District of Origin No	District to Serve	DEFENDANT DNLY DO NO Signature of Author	OT WR	ITE BELOW Deputy or Clerk	3. THIS	LINE Date
SPACE BELOW acknowledge receipt for the number of process indicated, Sign only for USM 285 if me han one USM 285 is submitte hereby certify and return the on the individual, company,	FOR USE Of total Total Processors at I have personal corporation, etc., at I	F U.S. MA ss District of Origin No	District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have	OT WR	ITE BELOW Deputy or Clerk s shown in "Remarks	3. THIS	Date cess described
space Below acknowledge receipt for the number of process indicated, Sign only for USM 285 if me han one USM 285 is submitte thereby certify and return the individual, company, I hereby certify and return	FOR USE Of total Total Processory at I have personal corporation, etc., at I ment that I am unable to	F U.S. MA ss District of Origin No	District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have	OT WR	ITE BELOW Deputy or Clerk s shown in "Remarks	3. THIS	Date Date ress described inserted below, and discretion
SPACE BELOW acknowledge receipt for the number of process indicated, Sign only for USM 285 if me han one USM 285 is submitte hereby certify and return the individual, company, I hereby certify and return Name and title of individual	FOR USE Of total Processory at I have personal corporation, etc., at I ment that I am unable to served (if not shown	SS District of Origin No	District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have	OT WR	ITE BELOW Deputy or Clerk s shown in "Remarks ation, etc. shown at the remarks below) A person of suit then residing in	3. THIS	Date Date ress described inserted below, and discretion
SPACE BELOW acknowledge receipt for the number of process indicated, Sign only for USM 285 if me han one USM 285 is submitte hereby certify and return the individual, company, I hereby certify and return Name and title of individual	FOR USE Of total Processory at I have personal corporation, etc., at I ment that I am unable to served (if not shown	SS District of Origin No	District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have	OT WR	ITE BELOW S Deputy or Clerk as shown in "Remarks ation, etc. shown at the e remarks below) A person of suit then residing in of abode	3. THIS s", the proone address able age address defendant	Date Date Date Date Date Date Date Date Date Date
acknowledge receipt for the number of process indicated. Sign only for USM 285 if me han one USM 285 is submitted thereby certify and return the individual, company, I hereby certify and return the individual and title of individual. Address (complete only difference of the individual of the indivi	FOR USE Of total Total Processore (at I have personal corporation, etc., at the transfer of th	F U.S. MA ss District of Origin No Mly served , he address shown to locate the individuations.	District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have	executed a above (See	ITE BELOW Deputy or Clerk s shown in "Remarks ation, etc. shown at the e remarks below) A person of suit then residing in of abode Date	3. THIS s", the proone address able age address defendant Time	Date Date Date Date Date Date Date Date Date Date

PRINT 5 COPIES:

- 1. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- HOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

	Kevin Cost							COURT CASE NUMBER		
DEFENDANT	Soch	or.				T	YPE OF PROCESS			
SERVE) O	SS (Street or RI	TD, Apartmen	t No., City,	, State and ZIP			N OF PROPERTY T	O SEIZE ()R CONDEMN	
BND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND AUDRESS BELOW							er of process to be with this Form 285	15		
	1200 MOKChick drive						er of parties to be in this case	is		
	geville					Check on U.S	for service J.A.			
Signature of Attorney other SPACE BELOV	FOR US	E OF U.	S. MA	RSHAL O	To the second	N OT WR				
0	FOR US	E OF U.	S. MA	Ē	defendant	N OT WR	ITE BELOW	3		
SPACE BELOW I acknowledge receipt for th number of process indicated (Sign only for USM 285 if m. than one USM 285 is submit I hereby certify and return th on the individual, company	FOR US e total Total ore led) have p	E OF U. Process Dis Ori	S. MA	RSHAL O District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have the individual, comp	OT WR	TE BELOW S Deputy or Clerk as shown in "Remark ation, etc. shown at t	THIS	Date Date Coss described	
SPACE BELOW I acknowledge receipt for the number of process indicated (Sign only for USM 285 if mithan one USM 285 is submit. I hereby certify and return to	FOR US e total Total ore ted) have p corporation, et	E OF U. Process Disconnection of the control of th	S. MA	RSHAL O District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have the individual, comp	OT WR	TE BELOW S Deputy or Clerk as shown in "Remark ation, etc. shown at t	THIS	Date Date cess described inserted below.	
SPACE BELOW I acknowledge receipt for the number of process indicated (Sign only for USM 285 if mithan one USM 285 is submit than one USM 285 is submit on the individual, company I hereby certify and return to the individual, company	FOR US e total Total ore ted) have p corporation, et arm that I am un served (if not s.	E OF U. Process Discording Original Process Original Pro	S. MA	RSHAL O District to Serve No	DEFENDANT ONLY DO NO Signature of Author ce of service, have the individual, comp	OT WR	ITE BELOW S Deputy or Clerk as shown in "Remark ation, etc. shown at the remarks below) A person of suit then residing in	THIS	Date Date cess described inserted below.	
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DISTRIBUTE TO:

- 1. CLERK OF THE COURT 2. USMS RECORD
- 3. NOTICE OF SERVICE
- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed, Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

UNITED STATES DISTRICT COURT for the pastern district Plaintiff Civil Action No. Defendant NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS To: Oliveris (Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service) Why are you getting this? A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached. This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed days (give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States) from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy. What happens next? If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States). If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service. Please read the enclosed statement about the duty to avoid unnecessary expenses. I certify that this request is being sent to you on the date below. Date: Signature of the attorney or unrepresented party

Telephone number

UNITED STATES DISTRICT COURT

for the eastern district

Civil Action No. WAIVER OF THE SERVICE OF SUMMONS (Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party Cevin Coit KX2601 Printed name of party waiving service of summons Printed name Telephone number

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		COURT CASE NUMBER							
DEFENDANT J. Sorber						TYPE OF PROCESS CIVIL			
SERVE AT	ADDRESS (Street	or RFD, Apar	tment No., C	ity, State and ZIP	Code)		ION OF PROPERTY TO	O SEIZE (OR CONDEMA
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW							pber of process to be red with this Form 285		15
1	Coun Coit 200 Moken	KX2601	ive				nber of parties to be red in this case	10	15
	Cullegeville	PAI	9426		4	3 (2) (4)	ck for service J.S.A.		
Signature of Att	omey other Originator	requesting ser	vice on beha	alf of:	FLAINTIFF	TELEPH	ONE NUMBER	DATE	
SPACE I	BELOW FOR eccipt for the total ess indicated.			ARSHAL C	DNLY DO N	N// OT W	ONE NUMBER RITE BELOW MS Deputy or Clerk	3.	2921 LINE
SPACE I acknowledge returner of proce	BELOW FOR	USE OF	U.S. M.	ARSHAL O	DNLY DO N	N// OT W	A RITE BELOW	3.	LINE
SPACE I acknowledge re number of proce Sign only for Us han one USM 2	BELOW FOR eccipt for the total ess indicated. SM 285 if more 85 is submitted) and return that I	USE OF Total Process	U.S. M. District of Origin No	District to Serve No	DEFENDANT ONLY DO N Signature of Authorite to Signature of Authorite to Signature of Authorite to Signature of Signatu	OT W	A RITE BELOW	THIS	Date Date
SPACE Is acknowledge renumber of processing only for Ushan one USM 2. Thereby certify a on the individual	BELOW FOR eccipt for the total ess indicated. SM 285 if more 85 is submitted) and return that I	USE OF Total Process ave personally on, etc., at the	U.S. M. District of Origin No served , □ address show	District to Serve Nohave legal evident win above on the off	DEFENDANT ONLY DO N Signature of Authority ce of service, have a the individual, comp	OT W	RITE BELOW MS Deputy or Clerk I as shown in "Remarks to the shown at	THIS	Date Date
SPACE I	BELOW FOR eccipt for the total ess indicated. ISM 285 if more 85 is submitted) and return that I had not been been been been been been been bee	USE OF Total Process ave personally on, etc., at the	U.S. M. District of Origin No served , □ address show cate the indi	District to Serve Nohave legal evident win above on the off	DEFENDANT ONLY DO N Signature of Authority ce of service, have a the individual, comp	OT W	RITE BELOW MS Deputy or Clerk I as shown in "Remarks to the shown at	THIS	Date Date Date Dess described inserted below.
SPACE I	BELOW FOR eccipt for the total ess indicated. (SM 285 if more (85 is submitted) and return that I had a company, corporations	USE OF Total Process ave personally on, etc., at the om unable to lo inot shown abo	U.S. M. District of Origin No served , □ address show cate the indi	District to Serve Nohave legal evident win above on the off	DEFENDANT ONLY DO N Signature of Authority ce of service, have a the individual, comp	OT W	RITE BELOW MS Deputy or Clerk It as shown in "Remarks oration, etc. shown at the See remarks below) A person of suit then residing in	THIS	Date Date Date Dess described inserted below.
SPACE Is acknowledge returned of processing only for Us. thereby certify in the individual. I hereby certify in the individual.	BELOW FOR eccipt for the total ess indicated. (SM 285 if more (85 is submitted) and return that I had a company, corporation of individual served (if	USE OF Total Process ave personally on, etc., at the om unable to lo inot shown abo	U.S. M. District of Origin No served , □ address show cate the indi	District to Serve Nohave legal evident win above on the off	DEFENDANT ONLY DO N Signature of Authority ce of service, have a the individual, comp	OT W	RITE BELOW MS Deputy or Clerk it as shown in "Remarks coration, etc. shown at the See remarks below) A person of suite then residing in of abode	THIS ", the proceed address able age as defendant"	Date Date Date cess described inserted below. and discretion is usual place
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DISTRIBUTE TO:

- 1. CLERK OF THE COURT 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Kevin Coit							COURT CASE NUMBER		
DEFENDANT							TYPE OF PROCESS			
SERVE AT	ADDRESS (Street	COW or RFD, Aparl	tment No., C	ity, State and ZIP	Code)			O SEIZE C	K CONDEMN	
	OF SERVICE COPY		1000	umber of process to be eved with this Form 285	6	15				
' K	evin Cuit Ki Duo Mokchi	12601					imber of parties to be rved in this case		15	
10	cilegeville,	OA 1940	26			1	eck for service U.S.A.			
Signature of Atto	orney other Originator	requesting ser	vice on beha		PLAINTIFF	TELEPI	HONE NUMBER	DATE	A M	
0	\geq			Ē	DEFENDANT		VIA	3.	29.21 LINE	
SPACE B	BELOW FOR cecipt for the total ss indicated.			Ē	DEFENDANT ONLY DO NO	OT W	HONE NUMBER VAITE BELOW SMS Deputy or Clerk	3.	6 3 3 5 3 6 5	
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DISTRIBUTE TO:

- 1, CLERK OF THE COURT 2, USMS RECORD
- 3. NOTICE OF SERVICE
- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

UNITED ST	ATES DISTRICT COURT for the eastern district
OF	A
Kevin Coit Plainliff Defendant	Civil Action No.
	REQUEST TO WAIVE SERVICE OF A SUMMONS
To: Stash Kow (Name of the defendant is a corpore	ation, partnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the A copy of the complaint is attached.	ne entity you represent, in this court under the number shown above.
service of a summons by signing and returning the waiver within days (give at least 30 days, or at l	e from the court. It is a request that, to avoid expenses, you waive formal e enclosed waiver. To avoid these expenses, you must return the signed least 60 days if the defendant is outside any judicial district of the United States) notice was sent. Two copies of the waiver form are enclosed, along with id means for returning one copy. You may keep the other copy.
What happens next?	
and the data the walker is filed but no summons w	it with the court. The action will then proceed as if you had been served ill be served on you and you will have 60 days from the date this notice nt (or 90 days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver with served on you. And I will ask the court to require	nin the time indicated, I will arrange to have the summons and complaint you, or the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about	the duty to avoid unnecessary expenses.
I certify that this request is being sent to y	ou on the date below.
Date:	Signature of the attorney or unrepresented party KENIN Cest Printed name
	Collegeville PA 19426
	E-mail address
	Tulankana mmyhar

	AO 399 (01/09) Waiver of the Service of Summons
	UNITED STATES DISTRICT COURT for the Eastern district
	Kevin Co.t Plainliff V. Jamie Sorber Defendant Civil Action No.
	To: Ste Glusha Kow (Name of the plainliff's altorney or unrepresented plainliff)
	I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's urisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within
L	of days from, the date when this request was sent (or 90 days if it was sent outside the Juited States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date:
	Printed name of party waiving service of summons KLVIN Cert KADGOI Printed name
č-	Law MokyChic drive College ville PA 19426 E-mail address
	Telephone number

Duty to Avoid Unnecessary Expenses of Serving a Summons

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Kevin Co.	1	COURT CASE NUMBER							
DEFENDANT J. Sorbev NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESC							YPE OF PROCESS	E LESDESS	- 22.65	
SERVE AT	Scalas ADDRESS (Street	or RFD, Apar	lment No., C	City, State and ZIP	Code)		N OF PROPERTY TO	O SEIZE (OR COND.	EMN
	OF SERVICE COPY	China any	ESS BELOW		er of process to be with this Form 285	100	15			
	Keun Gif K 1200 MoKO		ive				er of parties to be in this case		15	
- [Collegeville	PA 190	126			Check on U.S	for service S.A.		21620 1000	
	torney other Originator			Ē	PLAINTIFF Defendant	NIA	IE NUMBER		29, 8	
I acknowledge i number of proce (Sign only for U	receipt for the total	USE OF	District of Origin	- F	The state of the s	OT WRITE BELOW THIS LINE orized USMS Deputy or Clerk Date				
I hereby certify on the individua	and return that I had I, company, corporation	ive personally on, etc., at the	served . address sho	have legal eviden wn above on the or	ce of service, 🔲 have n the individual, comp	executed a	as shown in "Remarks ation, etc. shown at th	s", the proc ne address	cess describ inserted be	bed alow.
☐ I hereby ce	rtify and return that I a	m unable to lo	cate the ind	ividual, company,	corporation, etc. name	d above (Se	e remarks below)			
Name and title	of individual served (if	not shown abo	ove)				A person of suit then residing in of abode			
Address (compl	ete only different than s	shown above)					Date	Time		a p
							Signature of U.S. M	arshal or D	Deputy	
Service Fee	Total Mileage Char including endeavor		ling Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)				
REMARKS:										
14										
overna ot pre	TO: 1. CLERK OF T	THE COLUMN					PRIOR	EDITIONS	MAY BE	TISE

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed, Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Kevin Cei	COURT CASE NU	COURT CASE NUMBER					
DEFENDANT	J. Sorbe					TYPE OF PROCESS		
SERVE AT	Scala Street	et or RFD, Apm	iment No., C	ity, State and ZIP		SCRIPTION OF PROPERTY	TO SEIZE OR CO	NDEMN
D. 1100 12 1.00	E OF SERVICE COP	Y TO REQUES	ESS BELOW	Number of process to be served with this Form 28		5		
1	Keum Coit 1200 Moko Collegevill	KKAGO		Number of parties to be served in this case	15 DE	5		
- 1	Collegevill	e PA 19	426			Check for service on U.S.A.		
Signature of A	tomey other Originat	or requesting se	rvice on beha	-	PLAINTIFF DEFENDANT	TELEPHONE NUMBER	DATE	. 01
SPACE	BELOW FOR	R USE OF	U.S. M.	VA. V. V. 12. 12.		T WRITE BELO	W THIS LIN	
number of proc Sign only for t	receipt for the total ess indicated. USM 285 if more 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Author	orized USMS Deputy or Clerk Date		
hereby certify n the individu	and return that I	have personally tion, etc., at the	served , address show	have legal eviden on above on the o	ce of service, have	executed as shown in "Rema ny, corporation, etc. shown a	rks", the process de t the address inserte	scribed d below.
I hereby c	ertify and return that I	am unable to le	cate the indi	vidual, company,	corporation, etc. named	above (See remarks below)		
Vame and title	of individual served (if not shown abo	ove)				uitable age and disc in defendant's usua	
Address (comp	lete only different that	n shown above)				Date	Time	□ a
						Signature of U.S.	Marshal or Deputy	
			Total Charges	Advance Deposits	ts Amount owed to U.S. Marshal* or (Amount of Refund*)			
Service Fee	Total Mileage Ch including endeav	ors)				The second secon		
ervice Fee		ors)				\$0	.00	
Service Fee		ors)				\$0	.00	
		ors)				\$0	.00	

- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

UNITED STATE	S DISTRICT COURT
	for the eastern district -
08	8B
Kevin Ceit)
Janie Seiber Defendant) Civil Action No.
NOTICE OF A LAWSUIT AND REQU	EST TO WAIVE SERVICE OF A SUMMONS
To: Sealos	
(Name of the defendant or - if the defendant is a corporation, par	rtnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity A copy of the complaint is attached.	y you represent, in this court under the number shown above.
service of a summons by signing and returning the enclos waiver within days (give at least 30 days, or at least 60 d	the court. It is a request that, to avoid expenses, you waive formal sed waiver. To avoid these expenses, you must return the signed days if the defendant is outside any judicial district of the United States) was sent. Two copies of the waiver form are enclosed, along with ms for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will be se	the court. The action will then proceed as if you had been served erved on you and you will have 60 days from the date this notice 0 days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the t served on you. And I will ask the court to require you, or	time indicated, I will arrange to have the summons and complaint the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty	y to avoid unnecessary expenses.
I certify that this request is being sent to you on t	the date below.
Date:	Signature of the attorney or unrepresented party
	Kevin Ce, + KK2601 Printed name
	1200 Morchick drive
	College Ville PA 19426 E-mail address
	Telephone number

UNITED STATES DISTRICT COURT for the eastern district Plaintiff Civil Action No. Defendant WAIVER OF THE SERVICE OF SUMMONS (Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party KX 260) Printed name of party waiving service of summons Printed name

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

	Kallan	1					COURT CASE NUMI	BER	
DEFENDANT	Kevin Coi	ber					C.V.)		
SERVE AT	hem a	or RFD, Apar	tment No., C	lity, State and ZIP			ON OF PROPERTY T	O SEIZE O	R CONDEMN
	1200 Mo OF SERVICE COPY		STER AT NA	ME AND ADDR	ESS BELOW		per of process to be d with this Form 285	6	15
Revin Cot KN2601 1200 McKChick drive						Number of parties to be served in this case		1	15
	Callegevil	e PA	19426			Checon U.	k for service S.A.		
Signature of Att	torney other Originator	requesting se	rvice on beha		FLAINTIFF	TELEPHO	NE NUMBER	DATE	
	and the same of the same of						/ A	->	0
SPACE	BELOW FOR	USE OF	TIS M		DILY DO NO	V/ TWI	A RITE BELOW	THIS	29.01 LINE
I acknowledge i number of proce (Sign only for U	the state of the s	USE OF		ARSHAL O	English Andread				
I acknowledge in number of proce (Sign only for U than one USM 2	receipt for the total ess indicated. ISM 285 if more	Total Process	District of Origin No	District to Serve No	Signature of Author	rized USM	IS Deputy or Clerk as shown in "Remark	THIS	LINE Date
I acknowledge in number of proce (Sign only for Li than one USM 2 I hereby certify on the individual	receipt for the total ess indicated. ISM 285 if more 285 is submitted) and return that [] h	Total Process ave personally on, etc., at the	District of Origin No / served , address show	District to Serve Nohave legal evidence we above on the or	Signature of Author	executed any, corpo	IS Deputy or Clerk as shown in "Remark ration, etc. shown at t	THIS	LINE Date
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DISTRIBUTE TO:

1. CLERK OF THE COURT 2. USMS RECORD

3. NOTICE OF SERVICE

BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

	Kevin Coit					COURT CASE NUMI	BER	
DEFENDANT	S. Sorber					C:V:1		
SERVE AT	hemon ADDRESS (Street of	de Z or RFD, Apartmet	nt No., City	, State and ZIP		CRIPTION OF PROPERTY T	O SEIZE OR (CONDEMN
	OF SERVICE COPY	TO REQUESTER	MAN TA S			Number of process to be served with this Form 285		15
Revin Cost KX2GOI 1200 Mokchick drive						Number of parties to be served in this case	1	5
. Ц	Collegeville (A 19426	UTIVE		7-	Check for service on U.S.A.		
Signature of Att	orney other Originator	requesting service	e on behalf		PLAUTIFF	TELEPHONE NUMBER	DATE	20.01
SPACEL	PET OW FOR	HER OF H	S MA		DEFENDANT NO NO	<i>IV / H</i> OT WRITE BELOW		29.21
I acknowledge re number of proce (Sign only for U	eceipt for the total T	Total Process D	istrict of rigin	District to Serve		ized USMS Deputy or Cletk		
man pric com a				No				ate
I hereby certify	and return that I ha	ve personally ser n, etc., at the add	ved , ha	ve legal evidenc	ce of service, have a the individual, compa	executed as shown in "Remark my, corporation, etc. shown at t	s", the process he address inse	described
I hereby certify a	l, company, corporatio	n, etc., at the add	ress shown	ve legal evidence above on the on	the individual, compa	executed as shown in "Remark my, corporation, etc. shown at t above (See remarks below)	s", the process he address inse	described
I hereby certify a on the individual	l, company, corporatio	n, etc., at the add n unable to locate	ress shown the individ	ve legal evidence above on the on	the individual, compa	ny, corporation, etc. shown at t	he address inse	described sted below,
I hereby certify a on the individual I hereby certified I hereby certified and title o	l, company, corporatio	n, etc., at the add n unable to locate not shown above)	ress shown the individ	ve legal evidence above on the on	the individual, compa	above (See remarks below) A person of suither residing in	he address inse	described sted below,
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DISTRIBUTE TO:

- 1. CLERK OF THE COURT 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal, 5. ACKNOWLEDGMENT OF RECEIPT

UNITED STATES DISTRICT COURT for the eastern district OF Civil Action No. WAIVER OF THE SERVICE OF SUMMONS (Name of the plaintiff's attorney or unrepresented plaintiff) I have received your request to waive service of a summons in this action along with a copy of the complaint, two copies of this waiver form, and a prepaid means of returning one signed copy of the form to you. I, or the entity I represent, agree to save the expense of serving a summons and complaint in this case. I understand that I, or the entity I represent, will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service. I also understand that I, or the entity I represent, must file and serve an answer or a motion under Rule 12 within , the date when this request was sent (or 90 days if it was sent outside the 60 days from United States). If I fail to do so, a default judgment will be entered against me or the entity I represent. Date: Signature of the attorney or unrepresented party evin Coit KX2601 Printed name of party waiving service of summons

Duty to Avoid Unnecessary Expenses of Serving a Summons

Telephone number

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does not include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

UNITED STATES	S DISTRICT COURT for the eastern district
AV 70	or the Eastern district
Kevin Cuit Plaintiff V. Sorber Defendant	Civil Action No.
	ST TO WAIVE SERVICE OF A SUMMONS
To: Hernandez (Name of the defendant or - if the defendant is a corporation, parti	nership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity A copy of the complaint is attached.	you represent, in this court under the number shown above.
service of a summons by signing and returning the enclose waiver within days (give at least 30 days, or at least 60 days)	the court. It is a request that, to avoid expenses, you waive formal and waiver. To avoid these expenses, you must return the signed any if the defendant is outside any judicial district of the United States) as sent. Two copies of the waiver form are enclosed, along with a for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will be ser	ne court. The action will then proceed as if you had been served rved on you and you will have 60 days from the date this notice days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the tip served on you. And I will ask the court to require you, or	me indicated, I will arrange to have the summons and complaint the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty	to avoid unnecessary expenses.
I certify that this request is being sent to you on the	ne date below.
Date:	Signature of the attorney or unrepresented party Kevin Co. F. K. V. H. W. H. Printed name
	1200 MoKYChic drive Address Cellego ville pp 19426
	Ce lle go ville pr 19426 E-mail address
	Telephone number

UNIT	TED STATES DISTR	ICT COURT	
eastern	District of	PenASy lua	nia
Plaintiff	EXER		ID ORDER OF REFERENCE — CTION BY A UNITED STATES
V.	Case N	umber:	
Defendant			
NOTICE OF AVAILABI			STRATE JUDGE
1	TO EXERCISE JURIS	DICTION	
In accordance with the provisions of magistrate judge of this district court is availated and to order the entry of a final judgment. Exparties voluntarily consent.	able to conduct any or all p	roceedings in this ca	ase including a jury or nonjury trial
You may, without adverse substantiv from being exercised by a magistrate judge. I consent will not be communicated to any mag	If any party withholds cons	ent, the identity of th	ne parties consenting or withholding
An appeal from a judgment entered be this judicial circuit in the same manner as an	oy a magistrate judge shall appeal from any other judg	e taken directly to the ment of this district	ne United States court of appeals for court.
CONSENT TO THE EXERCISE OF	JURISDICTION BY	A UNITED STAT	tes Magistrate Judge
In accordance with provisions of 28 I States magistrate judge conduct any and all p conduct all post-judgment proceedings.	U.S.C. §636(c) and Fed.R.0 proceedings in this case, in	Civ.P. 73, the parties luding the trial, ord	in this case consent to have a United er the entry of a final judgment, and
Party Represented	Si	gnatures	Date
Keun Cart KX2601	- 2		3.29.21
	ORDER OF REFE	RENCE	
	ORDER OF REFE	RENCE	
IT IS ORDERED that this case be re United States Magistrate Judge, to conduct a §636(c) and Fed.R.Civ.P. 73.	eferred to		in accordance with 28 U.S.C.

NOTE: RETURN THIS FORM TO THE CLERK OF THE COURT ONLY IF ALL PARTIES HAVE CONSENTED ON THIS FORM TO THE EXERCISE OF JURISDICTION BY A UNITED STATES MAGISTRATE JUDGE.

PETITIONER	: NO:
VS.	
RESPONDENT	*
VERIFICA	ATION
The facts set forth in the foregoing	are true and correct to the best of the
undersigned's knowledge, information, and	d belief and are verified subject to the
penalties for unsworn falsification to authoritie	
	sa unidei i ennavivania Uninea Udde 4004
	es under l'emisyrvama omnes dode 4504
(28 U.S.C. § 1746).	es under l'emisylvania crimes code 4504
(28 U.S.C. § 1746).	es under l'emisylvania chimes code 4504
(28 U.S.C. § 1746). No Notary	es under l'emisylvania chimes code 4504
(<u>28 U.S.C. § 1746</u>).	es under l'emisylvania chimes code 4504
(28 U.S.C. § 1746). No Notary	Respectfully Submitted
(28 U.S.C. § 1746). No Notary Required	
(28 U.S.C. § 1746). No Notary Required	
(28 U.S.C. § 1746). No Notary Required	Respectfully Submitted
(28 U.S.C. § 1746). No Notary Required	Respectfully Submitted
(28 U.S.C. § 1746). No Notary Required	Respectfully Submitted, (signature)

Kevin Coit KX2601 1200 Mokychic drive Collegeville PA 19426 PA DEPARTMENT OF CORRECTIONS INMATE MAIL 03/29/2021 US POSTAGE \$008.55⁰ ZIP 19426 041M12252211

Clerk of Courts
eastern district Court
Civil division
601 Mar Market St
Phila PA 1916 19101



